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INDICATION FORM**

Application Number	09/928,049
Filing Date	08/13/2001
First Named Inventor	Doron Gamliel
Title	Ultra High Isolation Mixer
Art Unit	2645
Examiner Name	Lisa Hashem
Attorney Docket Number	PSC-206M5

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

000048745

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	1/16/06
Name	Harvey L. Kaylie	Telephone	(718) 934-4500
Title and Company	President, Scientific Components Corporation		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



psc-206m5

PTO/SB/47 (04-05)

Approved for use through 05/31/2006. OMB 0651-0016

U.S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

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INSTRUCTIONS : Only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be specified when the patentee would like correspondence related to maintenance fees to be mailed to a different address than the correspondence address for the application.

When to check the first box below: If the fee address for the patent and/or application number(s) you indicate is to be established with, or changed to, an existing Customer Number.

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For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:



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Request for Customer Number (PTO/SB/125) attached hereto
in the following listed application(s) for which the Issue Fee has been paid for patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER
7,013,122	09/928,049

Completed by (check one):



Applicant/Inventor

Siegmar Silber
Signature



Attorney or Agent of record 26,233
(Reg. No.)

Siegmar Silber

Typed or printed name



Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

(973) 779-2580

Requester's telephone number



Assignee recorded at Reel _____ Frame _____

6/27/06

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.



* Total of _____ forms are submitted.

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